

more cultured and in some ways more highly civilized group, the birth rate has receded. In the newer, more dissimilar, less advanced, recently added group, the birth rate has remained high or has perhaps even increased over its normal rate for the same group in Europe. The result, of course, is a tendency to replace the socially and economically higher group, with the group which is more virile but of a lower mental and social development. In this lies the peril of the falling birth rate which seems to characterize most civilized nations.

In an address before the American Association for the Advancement of Science, Louis I. Dublin¹ draws an interesting comparison between the rates of population increase in France, England and what is now Germany. He notes that at the beginning of the nineteenth century France led with 29,000,000, Germany was second with 23,000,000, and England was third with a population of about 18,000,000. A century later Germany was first with about 65,000,000, England was second with some 45,000,000, and France was third with 39,000,000. Thus the German population had trebled, England had increased by two and a half times, while France had increased less than one-half. In more recent years, he finds that the birth rates in both Germany and England have fallen considerably, although not to so great a degree as in France.

The National Birthrate Commission in England, reporting in 1916, stated that the birth rate had declined about one-third in the last thirty-five years and that the decline was due to a conscious limitation of the birth rate in the large mass of the population. Thus it seems that England is following close in the footsteps of France.

In the United States the rapid increase in total population has, of course, been largely facilitated by the high immigration rate. It has been further increased, as already noted, by the high rate of reproduction of the foreign-born rather than of the native stock. Dublin shows that there has been a pronounced and progressive decrease in birth rate in the United States for a period of years, and as in the case of France and England, the decrease has been selective and at the expense of the better and socially more valuable elements of the population. Cattell showed² that of 643 American men of science, the families from which they had sprung averaged 4.7 children each, whereas the families of these men themselves averaged only 2.3 children each. This figure is totally inadequate to maintain the status quo of the population, let alone providing for a healthy increase of population. Dublin quotes R. J. Sprague to the effect that in order to maintain equality of population, providing for infant mortality, adolescent mortality, unmarried individuals, sterility of marriage, and other minor factors, the average family must have almost four children.

In his arraignment of American national life, Dublin puts his finger unerringly on the point of

fault. This he states, is the failure of the educational system to inculcate national and altruistic ideals. "Our young men and women must be taught to realize early that we do not live for ourselves; that our intellectual, economic and social advancement must be carried forward not only as a tradition but more especially in terms of new vigorous and worthy personalities. Our educational system must make our various racial groups conscious of their best traditions and instill desires to see their better strain strengthened and increased as a foundation of the greater democracy of the future."

Many things can be brought to assist this desired end. Among these may be noted various economic premiums on larger families, tax exemptions for children, and above all, the honor and respect of the community for the woman who devotes herself to the rearing of a larger family in place of a public or other career. The very fault which Dublin invokes will be summarily dealt with by the war. A new national sense, and a new sense of brotherhood and realization of the obligation of service, will be among the inevitable sequents of the war. In fact they are developing during the war at an unprecedented rate.

PHYSICIANS' REBATES FROM DEALERS.

It is an established principle of medical ethics that no physician should accept a fee from another physician for referring patients. A corollary of this makes it unethical for a physician to pay fees to *anyone* for referring patients. If it is true that some physicians persist in this reprehensible practice of fee splitting then they should receive summary action from their local societies and short shrift in the good graces of their more honest and respectable fellows. On these matters there is common agreement, at least in the medical profession. In the matter of rebates from drug houses, for patients' prescriptions, and from surgical manufacturing houses for apparatus and appliances ordered for patients, there seems at first glance to be a decided difference. And yet, as we pointed out last month (Physicians' Commissions and the A. M. A., Editorial), exactly the same principle is involved. The patient has a legitimate right to know to whom and for what he is paying his money. The physician has no professional or ethical right without the knowledge of the patient, to collect two fees for the same service rendered.

This matter is succinctly and honestly stated in a letter from the proprietor of a surgical appliance house. The following is commended to the thoughtful attention of physicians:

"Replying to your query regarding our current practice for rebates or commissions to physicians who send us their patients for surgical appliances, will say that since December 1st we have not paid commissions in any form to any physicians. We adopted this ruling for two reasons. One is the impropriety of such a practice and the other is the increased cost of both raw and finished materials, and to continue this practice would necessitate a

1. Science, March 1, 1918.

2. Scientific Monthly, March, 1917.

much greater price to the consumer than is now charged. We are much pleased to say that we have on our list a large number of physicians who have answered our rebate check with a letter stating that they could not conscientiously accept a commission from us inasmuch as they had made a charge to their patient which they considered sufficient. This is purely a business proposition with us and if we find that our business through the physicians very materially decreases through this practice, we may find it necessary in the future to resume this sort of business."

Notice two things: First, the physician can not expect the dealer to hold a higher ethical standard than does the physician himself. If this particular firm reverts to the old custom, it will be a step backward and downward, and will be due to lack of support from physicians who prefer to receive rebates. Second, the letter quoted shows exactly how the patient has been forced even without his own consent to pay much more than the article was worth, in order that the physician might be given a rebate. The custom of such rebates is doomed and ought to be rendered obsolete by the medical profession. The custom will die as soon as all physicians are allied with those quoted above who returned their rebate checks. The dealer will render the service which pays the best and it is no hard matter to make it a paying proposition for him to be honest in his service charges. For after all, there is not the same obligation on the dealer to stop rebates as there is on the physician. The honest and honorable physician will not accept such rebates and will not deal with houses which offer them. JOURNAL advertisers, to the best of our knowledge, do not give rebates. Their goods are offered at fair prices and that is still another reason why every physician in the state should patronize our advertisers. The stamp of the JOURNAL insures honesty and no fee splitting.

NEW PLANT FOODS FOR MAN.

The effects of the war on food economics and metabolism, bid fair to far outlast the war in many respects. One permanent and valuable result will doubtless be a recognition of new articles of diet which have values not hitherto noticed or employed. Along this line, C. H. La Wall¹ contributes an interesting and valuable study of plants which are available now as food which were not considered in any wide sense previous to the war. He aptly states that we have food conservation and also food conversation, and both have a legitimate place. The trial and introduction of new articles of diet may well bring valuable additions to the regime of civilized races. That this has occurred in the past, is shown by Dr. Johnson's characterizing oats as "a grain fed to horses in England and to men in Scotland." The changed sentiment regarding tomatoes, and the original limited habitat and use of corn and potatoes are also cases in point.

La Wall notes the nutrient properties of alfalfa

which has a high food value and a low cost, and is chiefly handicapped by a large percentage of crude fiber. Chinese cabbage, cactus, cardoon, a mammoth celery chiefly grown in Europe, celeriac, chayote, chard, chicory, and cotton seed flour are enumerated. Dasheen is a new tuber, that is, new in the United States, resembling the common elephant ears in appearance, of which the yield per hill may run as high as twenty pounds. It has food value some 50 per cent. higher than potatoes, and is prepared and eaten much as are potatoes. It is similar to the taro and should not be more expensive than potatoes. So far it is chiefly found in the groceries of Chinatown.

Attention is called to the enormous food loss from unused "rose hips," the red fruits of the wild rose which are so common in many sections of the country. They are not edible raw but should be made into preserves and confections. The soy bean is another unused source of nutrition and differs from typical beans in having much more protein, less carbo-hydrate and more fat. Its caloric value is 1970 per pound. The addition of rice to a soy bean dietary gives a well balanced diet.

The Bureau of Plant Industry of the Department of Agriculture is endeavoring to introduce new vegetable foods which in many cases are already in use elsewhere in the world but have not received proper attention in the United States. It is an important and fascinating subject and well worth some study from physicians.

NURSES FOR THE NAVY.

The Navy Department has issued a call for an unlimited number of hospital corpsmen for duty on board ships as soon as they finish the required course of instruction at the Naval Hospital Schools. For several weeks enlistments in this branch of the service were practically closed on account of the congested condition at training stations. The congestion is now relieved and the Department desires to fill all schools immediately. Enlistments will be open for a period of one month, unless enlistments exceed present accommodations for training.

Enlistment in the hospital corps of the Navy will afford the average student or nurse a splendid opportunity to serve our country and at the same time continue studies and gain advancement. Many surgeons throughout the state may be able to suggest this branch of the service to friends and relatives who are eligible for enlistment and who most likely would not otherwise receive competent advice and information along these lines.

Experience as a nurse or knowledge of pharmacy is required for applicants who desire to enlist in the rating of hospital apprentice, first class. No practical experience or especial qualifications required for applicants who desire to enlist in the rating of hospital apprentice, second class; except that the applicant must have had an average general education. Examinations will be conducted by the medical officers at the recruiting stations of the Navy.

1. Amer. Jour. of Phar., March, 1918.